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Erin Sotolongo
3/15/05
(Signature)
(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/427,292 | 10/26/1999 | RONALD LEGERSTEE | 300-475 | 297 |

TITLE OF INVENTION: DEVICE AND METHOD FOR CHRONIC WOUND CONDITION TREATMENT

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|----------------|-----------------|------------------|------------|
| Nonprovisional | NO | \$1400 | \$0 | \$1400 | 03/21/2005 |
| EXAMINER | ART UNIT | CLASS-SUBCLASS | | | |
| ERECH, KARL D | 2876 | 235-07000A | | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563):
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev.03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

JOHNSON & JOHNSON MEDICAL
DIVISION OF ETHICON, INC.

ARLINGTON, TX

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Issue Fee
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 10-0750 (enclose an extra copy of this form).

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 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Theodore ShatynskiDate 3/15/05Typed or printed name Theodore ShatynskiRegistration No. 36,675

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